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**POWER OF ATTORNEY  
and  
CORRESPONDENCE ADDRESS  
INDICATION FORM**

<b>Application Number</b>	Unassigned
<b>Filing Date</b>	Herewith
<b>First Named Inventor</b>	Peter Hallemeier
<b>Title</b>	Optical Transmitter for ....
<b>Art Unit</b>	Unassigned
<b>Examiner Name</b>	Unassigned
<b>Attorney Docket Number</b>	OPT-008

I hereby appoint:



Practitioners at Customer Number:

23701

OR



Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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Individual Name

Address

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State

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I am the:



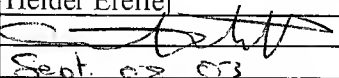
Applicant/Inventor.



Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

## SIGNATURE of Applicant or Assignee of Record

Name	Heider Ereifej		
Signature			
Date	Sept. 02 03	Telephone	

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.



\*Total of \_\_\_\_\_ forms are submitted.

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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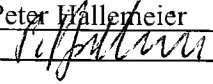
<input type="checkbox"/> Firm or Individual Name					
Address					
Address					
City		State		Zip	
Country					
Telephone		Fax			

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
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## **SIGNATURE of Applicant or Assignee of Record**

Name	Peter Hallemeier		
Signature			
Date	7/8/03	Telephone	

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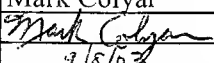
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**SIGNATURE of Applicant or Assignee of Record**

Name	Mark Colyar
Signature	
Date	9/8/03
Telephone	

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Address					
Address					
City		State	Zip		
Country					
Telephone		Fax			

I am the:



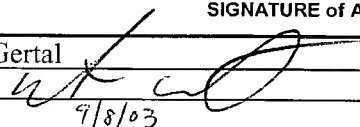
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**SIGNATURE of Applicant or Assignee of Record**

Name	Eitan Gertal		
Signature			
Date	9/8/03	Telephone	

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<input type="checkbox"/>	*Total of _____ forms are submitted.
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